FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000080110 (4)

CENTURY TILES COLLECTION, CORP.

FILED Apr 27 1998 8:00am Secretary of State



						41
Principal Place of Business Mailing Address					1 10011081 110 1912 19011 0011 0011 00114 0014 00191 19101 001191 1900 11011 0011 11	/#1
8891 SW 131 ST 8891 SW 131 ST MIAMI FL 33176 MIAMI FL 33176					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					09/15/1997	
2. Principal Place of Business		2a. Mailing Address	— <u> </u>		4. FEI Number Applied F	
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.					65-0180464 Not Appli	$\overline{}$
22		Suite, Apt. #, etc.		·	5. Certificate of Status Desired Section 48.75 Addition Fee Required	
City & State	Ð	City & State			6. Election Campaign Financing \$5.00 May B Trust Fund Contribution Added to Fees	
Zip	Country	Žip			8. This corporation owes or has paid the current year intangible	,
24	25	29	30		Personal Property Tax due June 30. Yes No	
	9. Name and Address of	Current Registered Agent			10. Name and Address of New Registered Agent	
RO	DRIGUEZ, RAMON		8	1 Name		
	91 SW 131 ST AMI FL 33176		82 Street Add		dress (P.O. Box Number is Not Acceptable)	
1440	AMITE GOTTO		8:	3		
			84	4 City	FL 85 Zip Code	
11. Pursuant office or reacent. La	to the provisions of Sections 6 egistered agent, or both, in the miliar with, and accept the	507.0502 and 607.1508, Florida Statute State of Florida. Such change was to obligations of Section 607.0505.	ites, the aborauthorized b	ve-named cor by the corpora	rporation submits this statement for the purpose of changing its registation's board of directors. I hereby accept the appointment as registe	red red
SIGNATURE						
12.	Signature, typed or printed name of regi	stered agent and title if applicable (NO ERS AND DIRECTORS	TE: Registered A	geni signature requ	ulred when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	DELETE	1.1 TITLE			ddition
NAME	RODRIGUEZ, RAMON		1.2 NAME			
STREET ADDRESS	8891 SW 131 ST			ET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33176		1.4 CITY			
TITLE		DELETE	2.1 TITLE		☐ Change ☐ A	ddition
NAME			2.2 NAME	.		
STREET ADDRESS			2.3 STREE	ET ADDRESS		
CITY-ST-ZIP			2. 4 CITY	-ST-ZIP	****	
TITLE		DELETE	3.1 TITLE		Change A	ddition
HAME			3.2 NAME	:		
STREET ADDRESS			3.3 STREE	ET ADDRESS		j
CITY-ST-ZIP			3.4. CITY	-ST-ZIP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ A	ddition
NAME			4. 2 NAM	Ε		1
STREET ADDRESS			4.3 STRE	ET ADDRESS		
CFTY-ST-ZIP			4.4 CITY-	-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ A	ddition
NAME			5.2 NAME	E		
STREET ADDRESS			5.3 STRE	ET ADDRESS		
CITY-ST-ZIP			5.4 CITY-	-ST-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ A	ddition
NAME			6.2 NAME	:		
STREET ADDRESS			6.3 STRE	ET ADDRESS		
CITY-ST-ZIP			6.4 CITY			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: